COUNTY OF MOORE NORTH CAROLINA

INVITATION FOR FORMAL BIDS

| ISSUE DATE: November 3, 2016 | IFB#: 2017-02 |
|----------------------------------------------------------|----------------------|
| TITLE: LANDFILL COMPACTOR - (REMANUFACTURED/REFABRI | CATED/RECONDITIONED) |
| ISSUING DEPARTMENT: | |
| County of Moore Financial Services Attn: Terra Vuncannon | |

206 S. Ray Street
Po Box 905
Carthage, NC 28327

Sealed Bids will be received until **4:00 p.m., Tuesday November 15, 2016** from qualified vendors for a Remanufactured, Refabricated or Reconditioned Landfill Compactor for the County of Moore Public Works Department Solid Waste Division

All inquiries for information concerning Instructions to Bidders, Bid Submission Requirements or Procurement Procedures shall be directed to (in writing):

Terra Vuncannon, Purchasing Manager P.O. Box 905 206 S. Ray Street Carthage, NC 28327 (910) 947-7118 (Telephone) (910) 947-6311 (Fax)

tvuncannon@moorecountvnc.gov

Sealed Bids shall be mailed and/or hand delivered to the Issuing Department shown above, and the envelope shall bear the name and number of this Invitation for Bids. It is the sole responsibility of the Bidder to ensure that its bid reaches the Issuing Department by the designated date and hour indicated above.

In compliance with the Invitation for Bids and to all the terms and conditions imposed herein, the undersigned offers and agrees to furnish the services and install the goods described in accordance with the attached signed bid.

| Firm Name: | Date: |
|------------|----------|
| Address: | Phone: |
| | By: |
| | (typed) |
| | By: |
| | (signed) |

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INSTRUCTIONS TO BIDDERS

- 1. Sealed Bids shall be submitted to the Issuing Department- Attn: Terra Vuncannon and include the enclosed Bid Form. In order for a bid to be considered, it shall be based on the terms, conditions and specifications contained herein and shall be a complete response to this Formal Bid. The County of Moore (County) reserves the right to make an award in whole, or in part, and to reject any and/or all bids, and to waive any informality in bids unless otherwise specified by the Bidder. The County reserves the right to award to one or more vendors. Nothing in this Bid Document is intended to be or will be construed an exclusive agreement between the County and the Bidder. Both parties remain free to enter into similar agreements with third parties. The Bidder shall sign the bid correctly and bids may be rejected if they show omissions, alterations of form, additions not called for, conditional proposals or any irregularities of any kind.
- 2. All labor costs, direct and indirect, shall have been determined and included in the proposal. The cost and availability of all equipment, materials, and supplies associated with performing the services described herein shall have been determined and included in the proposal. Do not include sales tax in bid figures. The County pays sales tax and will add this to your proposal figures separately when invoices are paid. All price quotes shall include delivery to the delivery point, installation and set-up charges, as necessary. Goods shall be set in place ready for owner's use. All goods shall be new and of industry standard quality. No remanufactured, refurbished or used goods will be accepted.
- 3. After the Bid issue date, all communications between the Issuing Department and prospective Bidders shall be in writing. No oral questions shall be accepted. Any inquiries, requests for interpretation, technical questions, clarifications, or additional information shall be directed to Terra Vuncannon at tvuncannon@moorecountync.gov. All questions concerning this Formal Bid shall reference the section and page number. Questions and responses affecting the scope of the goods will be provided to all prospective Bidders by issuance of an Addendum. All written questions shall be received by the Issuing Department no later than 10:00 am Wednesday November 9, 2016. NO EXCEPTIONS. This includes any request for substitution or "or equal" items. All addenda pertaining to this Bid will be posted on the County website at www.moorecountync.gov within 24 48 business hours after the deadline for questions. It is the bidder's responsibility to check the website for the addenda.
- 4. The County will not be responsible for any oral instructions. Should a Bidder find discrepancies in, or omissions from the documents, or should be in doubt as to their meaning, s/he should at once notify the Issuing Department in writing, and a written addendum shall be issued. Acknowledgement of any Addendum received during the time of the bid shall be noted on the Bid Form in the spaces provided. In closing of a contract, any Addendum issued shall become a part thereof. It is the Bidder's responsibility to assure that all addenda have been reviewed and, if need be, signed and returned with the bid.
- 5. Bids will be examined promptly after opening and award will be made at the earliest possible date. The prices quoted shall be held firm, and no bids may be withdrawn until **90 days** after proposal opening date. The County reserves the right to conduct any test/inspection it may deem advisable to ensure services/materials/supplies/equipment, as appropriate, conform to specifications.

- 6. Pursuant to North Carolina General Statutes Section 143-129, "award shall be made to the lowest responsible, responsive bid or bidders, taking into consideration quality, performance and the time specified in the proposals for the performance of the contract."
- 7. The materials/supplies/equipment furnished under any resulting contract shall be covered by the manufacturer's most favorable commercial warranty. Each Bidder shall plainly set forth the warranty for the goods in the proposal. Operations and maintenance manuals for equipment shall also be provided, as specific and appropriate.
- 8. All purchases for goods or services are subject to the availability of funds for this particular purpose.
- 9. The bidder shall not represent itself to be an agent of the County.
- 10. The General Statutes of the State of North Carolina, insofar as they apply to purchasing and competitive bidding, are made a part hereof.
- 11. The County of Moore is committed to creating and maintaining an environment free from harassment and other forms of misconduct that fundamentally compromise the working environment of the County. All contractors performing work/services at a County facility shall take all necessary steps to assure that none of its employees engage in harassment or intimidation relating to personal beliefs or characteristics of anyone on the County's premises, including but not limited to, race, religion, age, color, sex, national origin or disability. Such harassment is unacceptable and will not be condoned in any form at the County of Moore. If such conduct occurs, the contractor will take all necessary steps to stop it and prevent its future occurrence. This policy shall be strictly enforced.
- 12. For all the work being performed under this Contract, the County of Moore has the right to inspect, examine, and make copies of any and all books, accounts, records and other writing relating to the performance of the work. Audits shall take place at times and locations mutually agreed upon by both parties, although the Bidder/contractor must make the materials to be audited available within one (1) week of the request for them.
- 13. All Bidders must complete and submit the Vendor Application Form with their proposal package. This information will be used to create or update the County's Vendor file.
- 14. Bidders are cautioned that this is a formal bid, not a request for contract, and the County of Moore reserves the right to reject any and/or all bids. It further reserves the right to waive informalities insofar as it is authorized so to do where it deems it advisable in protection of the best interests of the County.
- 15. Bids will be tabulated, evaluated and a recommendation presented to the County Manager and/or County of Moore Board of Commissioners for their approval.
- 16. Any and all exceptions to the Specifications must be stated in writing, giving complete details of what is to be furnished in lieu of requested Specifications.
- 17. The County of Moore reserves the right to cancel and terminate any resulting contract, in whole or in part, without penalty, upon forty-five (45) days' notice to the Bidder(s). Any contract cancellation shall not relieve the Bidder(s) of the obligation to deliver any outstanding

services issued prior to the effective date of the cancellation.

- 18. <u>Bids in one (1) original and two (2) copies will be received from each bidder in a sealed envelope or package.</u> Each original shall be signed and dated by an official authorized to bind the form. Unsigned bids will not be considered.
- 19. Upon receipt by Moore County Financial Services, your Bid is considered a public record except for material which qualifies as "trade secret" information under N.C. Gen. Stat. 66-152 et. seq. After the Bid opening, your Bid may be reviewed by the County's evaluation committee, as well as other County staff and members of the general public who submit public records requests. To properly designate material as trade secret under these circumstances, each Bidder must take the following precautions: (a) any trade secrets submitted by a Bidder must be submitted in a separate, sealed envelope marked "Trade Secret Confidential and Proprietary Information Do Not Disclose Except for the Purpose of Evaluating this Proposal," and (b) the same trade secret/confidentiality designation must be stamped on each page of the trade secret materials contained in the envelope.

In submitting a Bid, each Bidder agrees that the County may reveal any trade secret materials contained in such response to all County staff and County officials involved in the selection process, and to any outside consultant or other third parties who serve on the evaluation committee or who are hired by the County to assist in the selection process. Furthermore, each Bidder agrees to indemnify and hold harmless the County and each of its officers, employees, and agents from all costs, damages, and expenses incurred in connection with refusing to disclose any material which the Bidder has designated as a trade secret. Any Bidder that designates its entire Proposal as a trade secret may be disqualified.

21. Bidder shall comply with the North Carolina Workers' Compensation Act and shall provide for the payment of workers' compensation to its employees in the manner and to the extent required by such Act. In addition the Provider shall maintain, at its expense, the following minimum insurance coverage:

General Liability - \$2,000,000 Auto Liability - \$2,000,000 Umbrella Coverage - \$5,000,000

20. The following must be included in the Bid Packet to be considered a responsive bid:

Signed Bid Form Notarized Non-Collusion Affidavit Notarized E-verify Affidavit Iran Divestment Act Certification Vendor Form (including three references) W-9 Form

SPECIFICATIONS

The County is seeking formal bids on a Remanufactured, Refabricated or Reconditioned Landfill Compactor for the Public Works Department- Solid Waste Division.

1. **Scope**.

1.1 These specifications are intended to describe a steel-wheeled trash compactor for all season use on materials commonly disposed of in a municipal solid waste or C&D landfills. This machine shall be a remanufactured or refabricated compactor, standard production model landfill compactor. The base operating minimum weight shall be 70,000 lbs. All components and requirements shall be at a minimum as listed in the machine specifications.

The County has an immediate need therefore delivery schedule is an important factor. Expected delivery within 60 days of award.

2. Machine Specifications (or Comparable – MUST list any comparable differences)

2.1 Engine.

- 2.1.1. The engine shall be a 6 cylinder Cummins / 4 stroke 335 hp. At 2100 rpm. turbocharged, aftercooled diesel Tier II compliant.
- 2.1.2. The engine shall have replaceable element oil and fuel filters, replaceable dry type primary and secondary element air cleaners, and service indicator.
- 2.1.3. The engine shall have direct-injection fuel system with individual adjustment-free injection pumps and valves.
- 2.1.4. The engine radiator to have steel fan to purge radiator of debris.
- 2.1.5. The radiator compartment should have swing out doors and be totally Accessible for cleaning.

2.2. Transmission and Drive.

- 2.2.1. Transmission shall be electronically controlled planetary power shift type, (2) speed forward and reverse. No hydrostatic drive.
- 2.2.2. Final drives shall be planetary design and full floating axles, independently removable from wheel mounting.
- 2.2.3. Machine shall be all wheel drive with locked front and no-spin rear differentials
- 2.2.4. Axles and final drive seals shall be shielded and protected from wire, cable, or plastic that may wrap around the wheels and axles during operation.

2.3. Hydraulics.

- 2.3.1. Hydraulic system shall be fully filtered with gear driven pump and service indicator.
- 2.3.2. All hydraulic lines shall be shielded for maximum protection.
- 2.3.3. Hydraulic tank shall have an oil level site gauge.

2.4. Steering.

2.4.1. Steering shall be double acting hydraulic cylinder type with positive flow control for consistent steering response.

2.5. Electrical.

- 2.5.1. The starting & charging system shall be 24 volt with a 75 amp alternator.
- 2.5.2. The compactor shall be equipped heavy duty batteries.
- 2.5.3. The electrical system shall have a cab mounted, battery disconnect switch.
- 2.5.4. All wiring shall be color-coded.
- 2.5.5. All electrical connectors should be sealed and wiring harness shall be protected against steam cleaning, incidental wear and environmental damage.

2.6 Cab.

- 2.6.1. The cab shall meet ROPS criteria that applies to landfill compactors.
- 2.6.2. The cab shall be pressurized and have filtered air system.
- 2.6.3. The cab shall have sound suppression insulation limiting sound to maximum 78 DBA.
- 2.6.4. The cab shall have a heater / defroster with 3 speed fan and air conditioner.
- 2.6.5. The cab shall have an ergonomically designed side mounted seat fully adjustable with retractable seat belt, plus interior lighting.
- 2.6.6. The cab shall have a dash accessible and visible to the operator with following gauges, tachometer, hour meter, fuel, engine oil pressure, transmission oil temp, coolant temp, battery volts/amps.
- 2.6.7. The cab shall have a warning horn capable of producing 105db @ 10 ft.
- 2.6.8. The compactor shall have displayed in the cab an electronic monitoring system with warning devices for, high engine temp, high transmission temp, low oil pressure and parking brake, plus engine air filter restrictions.
- 2.6.9. The cab shall have 10lb ABC type fire extinguisher dry chemical type.

2.7 Blade.

2.7.1. Blade shall be suitable for landfill operations, equipped with replaceable cutting edges and end bits. The blade upper portion shall have a heavy-duty, see through trash rack designed for operator visibility. The width of the blade shall be at least 12 feet. Minimum ground clearance with blade raised, shall be 3 feet.

2.8 <u>Proprietary Wheels</u>

2.8.1. Wheels shall have welded on cleats, wear tips shall be composed of high alloy steel and designed for maximum compaction in C&D and MSW operation. Wheels shall have wear bars on the inside the wheel cones, with 1 inch bands. Wheels shall have full width compaction design.

2.9. Brakes.

- 2.9.1 Service brake shall be fully hydraulic actuated, self adjusting.
- 2.9.2 Parking brake shall be manually activated, driveline mounted disc or drum.

- 2.10. <u>Body</u>.
- 2.10.1 Frame shall be constructed of heavy plate steel weldments. Front and rear frames are to be connected by hardened steel pins.
- 2.10.2 All internal components are to be guarded and shielded to protect against trash build-up that could cause damage.
- 2.10.3 Belly pans and hood shall be hydraulically operated for easy access.

2.11. Other Equipment

- 2.11.1 The compactor shall have the following miscellaneous items; front and rear windshield washer & wipers front, right and left side sun visors. Tinted safety glass, horn, back up alarm, (2) two cab mounted ventilation fans, AM/FM stereo radio.
- 2.11.2 The cab shall have (4) four halogen work lights 2 front and 2 rear.
- 2.11.3 The compactor shall have a tow pin or hitch at the rear.
- 2.11.4 The compactor shall have a lockable vandal protection kit.
- 2.11.5 Full capacity shall be a minimum of 165 gallons.
- 2.12. Fire Suppression System: additional cost for this option to be quoted separately.
- 2.13. Warranty.
- 2.13.1 Full machine warranty to cover entire machine for six months or 1000 hours to include all parts, labor and travel time.
- 2.14. Service and back up support. Must be able to respond to service request within 24 hours.

BID FORM

Sealed Bids will be opened at **4:00 p.m., Tuesday November 15, 2016** in Financial Services, County of Moore, 206 S. Ray Street, Carthage, NC 28327.

Use this form only for submitting bids. In submitting your bid, keep in mind that any alterations, changes in bid format, etc. will make it difficult to evaluate bids. All items should be in the units, quantities, units of measurement, etc. specified. Do not submit alternates unless requested. The County of Moore shall reserve the right to reject any and/or all bids.

| | Bidder | |
|---------|------------------------------------------------------------------------------------------|----------------------------------------------------------|
| | Address | |
| | Telephone | Fax |
| | Signature | |
| | Name of Manufacture | |
| | Compactor Model Proposed | |
| | Compactive effort per linear inch PLI" | rating |
| | Delivery Time After Award | Days |
| | Compactor bid price with proprietary wh F.O.B. County Landfill. | eels, \$ |
| | Option for fire suppression system | \$ |
| | Total (including 6.75% sales tax) | \$ |
| • | that the contents of this bid are known to noting all requirements have been complied wi | o one outside the undersigned, and to the best of my th. |
| Date | Authorized Signate | ire |
| Receipt | of the following addendum (if applicable) i | s acknowledged: |
| | Addendum No. | _ Date: |
| | Addendum No. | Date: |

NON-COLLUSION AFFIDAVIT

State of North Carolina County of Moore

| | , being first duly sworn | n, deposes and says that: |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| He/She is the | of hed bid; | , the |
| He/She is fully informed respecting of all pertinent circumstances respe | | of the attached bid and |
| Neither the said Bidder nor any of employees or parties of interest, inconnived or agreed, directly or indicollusive or sham bid in connection submitted or to refrain from biddin directly or indirectly, sought by agrany other Bidder or to fix overhead or to secure through collusion, consagainst the County of Moore or any The price or prices quoted in the at collusion, conspiracy, connivance of agents, representatives, owners, employees the control of t | cluding this affiant, has in any irectly, with any other Bidder, n with the contract for which the gin connection with such contreement or collusion or community, profit or cost element of the spiracy, connivance or unlawfully person interested in the propertical that are fair and proper or unlawfull agreement on the propertical transfer in the propertical transfe | way colluded, conspired, firm or person to submit a ne attached bid has been tract, or has in any manner, unication or conference with bid price of any other Bidder ul agreement any advantage osed contract; and, and are not tainted by any part of the Bidder or any of its |
| | | Title |
| State of North Carolina County of Subscribed and sworn before me, This day of, 2 | 2016 | |
| Notary Public My commission expires: | | |

Moore County E-Verify Affidavit

STATE OF NORTH CAROLINA

| | AFFIDAVIT | | | | |
|---------|-----------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| COU | TTY OF MOORE | | | | |
| I, | (the individual attesting below), being duly authorized by and on behalf of | | | | |
| | (the entity bidding on project hereinafter "Employer") after first being duly sworn | | | | |
| hereby | swears or affirms as follows: | | | | |
| 1. | Employer understands that <u>E-Verify</u> is the federal E-Verify program operated by the United States Department of | | | | |
| Homela | nd Security and other federal agencies, or any successor or equivalent program used to verify the work | | | | |
| authori | ation of newly hired employees pursuant to federal law in accordance with NCGS §64-25(5). | | | | |
| 2. | Employer understands that Employers Must Use E-Verify. Each employer, after hiring an employee to work in | | | | |
| the Uni | ed States, shall verify the work authorization of the employee through E-Verify in accordance with NCGS§64- | | | | |
| 26(a). | | | | | |
| 3. | Employer is a person, business entity, or other organization that transacts business in this State and that employs | | | | |
| 25 or n | ore employees in this State. (mark Yes or No) | | | | |
| | a. YES, or | | | | |
| | b. NO | | | | |
| 4. | Employer's subcontractors comply with E-Verify, and if Employer is the winning bidder on this project Employer | | | | |
| will en | ure compliance with E-Verify by any subcontractors subsequently hired by Employer. | | | | |
| | d, this day of, 2016. | | | | |
| | , , , , | | | | |
| | | | | | |
| | | | | | |
| Signat | ure of Affiant | | | | |
| _ | r Type Name: | | | | |
| | II | | | | |
| State o | North Carolina | | | | |
| County | of | | | | |
| Signed | and sworn to (or affirmed) before me, this the | | | | |
| day of | , 2016. | | | | |
| Му Со | of and sworn to (or affirmed) before me, this the | | | | |
| | Notary Public | | | | |

| RFP Number (if applicable): | |
|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| Name of Vendor or Bidder: | |
| IRAN DIVESTMENT ACT O | |
| As of the date listed below, the created by the State Treasurer pu | vendor or bidder listed above is not listed on the Final Divestment List ursuant to N.C.G.S. 147-86.58. |
| The undersigned hereby certifies make the foregoing statement. | s that he or she is authorized by the vendor or bidder listed above to |
| | |
| Signature | Date |
| Printed Name | Title |

Notes to persons signing this form:

N.C.G.S. 147-86.59(a) requires this certification for bids or contracts with the State of North Carolina, a North Carolina local government, or any other political subdivision of the State of North Carolina. The certification is required at the following times:

- When a bid is submitted
- When a contract is entered into (if the certification was not already made when the vendor made its bid)
- · When a contract is renewed or assigned

N.C.G.S. 147-86.59(b) requires that contractors with the State, a North Carolina local government, or any other political subdivision of the State of North Carolina must <u>not</u> utilize any subcontractor found on the State Treasurer's Final Divestment List.

The State Treasurer's Final Divestment List can be found on the State Treasurer's website at the address www.nctreasurer.com/lran and will be updated every 180 days.



Vendor Application

County of Moore Financial Services – Purchasing Division PO Box 905 Carthage, NC 28327

Phone: (910) 947 - 7118 Fax: (910) 947 - 6311

| Please Type or Print Legibly | | | , , | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--|
| Federal ID # | SS# | | Vendor # | |
| Vendor Name | | | Date | |
| ORDER ADD | RESS | | PAY ADDRESS | |
| Street | | Street | | |
| Street | | Post Office Box | | |
| City | | City | | |
| State Zi ₁ | o Code | State | Zip Code | |
| CONTACT PERSON | TELEPHONE NUM | BER | FAX NUMBER | |
| YEAR ESTABLISHED | TERMS | | DISCOUNT | |
| CONTRACTOR'S LICENSE # (if applicate | ole) | SIGNATURE EMAIL ADDRESS | <u>.</u> | |
| definition, minority group members are for Disabled status, 51% of the compar | Minority Business Enterp the company must be owned and co the Black Americans, Hispanic Ame | orise W controlled by minority gracicans, American Indian by disabled persons. Or Service(s) | omen Business Enterprise oups or women. For the purpose of this as and/or American Women. To qualify | |
| | Referen | ces | | |
| | | | | |

Form W-9
(Rev. December 2014)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

| Internal | Ravanue Sarvice | | | | | | | | | | | |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------|---------------|----------------------------------------------|--|--|--|
| | 1 Name (as shown on your inco | me tax returnj. Name is required on this | line; do not leave this line blank. | | | | | | | | | |
| рада 2. | | | | | | | | | | | | |
| 5 | 3 Check appropriate box for federal tax classification; check only one of the following seven boxes: ☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate single-member LLC ☐ ☐ Ilmited liability company, Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ► | | | | Examptions (codes apply only to certain entities, not individuals; see instructions on page 3); Exempt payee code (if any) | | | | | | | |
| Print or type Specific Instructions | Note. For a single-member the tax classification of the | LLC that is discoverded, do not check I. | | ik the appropriate box in the line above for ox | | | | | Exemption from FATCA reporting code (if any) | | | |
| Œ 5 | Other (see instructions) ► | | | | (Applies to accounts mainteined outside the U.S.) | | | | | | | |
| See Specif | Address (number, street, and City, state, and ZIP code | apt. or suite no.) | | Requester's name a | ind address | (options | ij | | | | | |
| 0) | 7 List account number(s) here (c | optional) | | | | | | | | | | |
| Par | Taynayar Idant | ification Number (TIN) | | | | | | | | | | |
| | | ox. The TIN provided must match th | ne name given on line 1 to av | old Social sec | urity numb | er - | | | | | | |
| | | , this is generally your social securit | | | 7 1 | | П | Т | П | | | |
| | | sregarded entity, see the Part I Instr ation number (EIN). If you do not ha | | | - | - | 11 | | | | | |
| | i page 3. | and number (EIV). If you do not no | ive a number, see now to ge | or | | _ | | | | | | |
| Note. | If the account is in more than | one name, see the instructions for | line 1 and the chart on page | 4 for Employer | identificati | on numb | ber | |] | | | |
| guidei | ines on whose number to ent | er. | | | | | П | Т | 1 | | | |
| _ | | | | | | | $\perp \perp$ | | | | | |
| Par | | | | | | | | | | | | |
| | penalties of perjury, I certify t | | | | | | | | | | | |
| | | is my correct taxpayer identification | | | | | | | | | | |
| Ser | | noiding because: (a) I am exempt fro backup withholding as a result of a pholding; and | | | | | | | | | | |
| 3. I ar | n a U.S. citizen or other U.S. | person (defined below); and | | | | | | | | | | |
| 4. The | FATCA code(s) entered on the | nis form (if any) indicating that I am | exempt from FATCA reportir | ng is correct. | | | | | | | | |
| Interes genera | Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have falled to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3. | | | | | | | | | | | |
| Sign Here | Signature of U.S. person ► | | D | ato ► | | | | | | | | |
| | eral Instructions | vanue Code unless otherwise noted. | Form 1098 (home mo (tuttion) | | 3-E (student | loan inte | arost), 10 | 008-T | | | | |
| | | it developments affecting Form W-9 (suc | Form 1099-C (cancel Form 4000 & formula | | | | | | | | | |
| as legis | lation enacted after we release it) | is at www.irs.gov/fw9. | | fyou are a U.S. perso | | | | L to | | | | |
| | ose of Form | | provide your correct TI | N. | | | | | | | | |
| retum v | with the IRS must obtain your con | ter) who is required to file an information rect taxpayer identification number (TIN) | to backup withholding. | | | | | e sub | pect | | | |
| which r | nay be your social security number (TTIN), adoption taxpayer identific | er (SSN), individual taxpayer identificatio cation number (ATIN), or employer | | - 4 | | | | | | | | |
| identification number (EIM), to report on an information return the amount paid to | | | to be immedi | Certify that the TIN you are giving is correct (or you are waiting for a number to be issued). | | | | | | | | |
| | include, but are not limited to, the | | 2. Cortify that you an | e not subject to back | | | | | | | | |
| | 1099-INT (Interest earned or paid | • | Claim exemption tapplicable, you are also | from backup withhold | ing if you ar | e a U.S. | exempt ocable s | payer hare | a. If | | | |
| | | ose from stocks or mutual funds) | any partnership income | e from a U.S. trade or | business is | not sub | ject to th | 10 | | | | |
| | | ome, prizes, awards, or gross proceeds) es and certain other transactions by | withholding tax on fore | ign partners' share of A code(s) entered on t | | | | | | | | |
| • Form broken | | as and curtain outer transactions by | exampt from the FATC | A reporting, is correct | | | | | | | | |
| • Form | 1099-S (proceeds from real estat | a transactions) | page 2 for further infor | mation. | | | | | | | | |

Form W-9 (Rev. 12-2014)